

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled BAG WITH MESH WALL AND HEAT SEAL DIE**

the specification of which

(check one) ☒ [X] is attached hereto.

☐ [] was filed on _____ as
Application Serial No. _____
and was amended on _____.
(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed: NONE

Prior Foreign Application(s)

Priority Claimed

Yes No
[] []

(Number) (Country) (Day/Month/Year filed)

[] []

(Number) (Country) (Day/Month/Year filed)

[] []

(Number) (Country) (Day/Month/Year filed)

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
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(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
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(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
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I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Garrettson Ellis, Reg. No. 22,792; George H. Gerstman, Reg. No. 22,419; Terrence W. McMillin, Reg. No. 30,476; and Daniel M. Gurfinkel, Reg. No. P.34,177, GERSTMAN, ELLIS & MCMILLIN, LTD., Two North LaSalle Street, Suite 2010, Chicago, Illinois 60602. *

Address all telephone calls to Garrettson Ellis at telephone no. (312) 263-4350.

Address all correspondence to Garrettson Ellis, GERSTMAN, ELLIS & MCMILLIN, LTD., Two North LaSalle Street, Suite 2010, Chicago, Illinois 60602.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of

* Note change of address form enclosed. Please use that as the address.

title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR Michael J. Recchia, Jr.		INVENTOR'S SIGNATURE <i>X Michael Recchia</i>	DATE 1-7-00
RESIDENCE 32 W. Schreiber Roselle, Illinois 60172		CITIZENSHIP US	
POST OFFICE ADDRESS Same as Above			
FULL NAME OF SECOND JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			
FULL NAME OF THIRD JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			
FULL NAME OF FOURTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			
FULL NAME OF FIFTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			
FULL NAME OF SIXTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			

Applicant or Patentee: Michael J. Recchia, Jr. Attorney's
Docket# 652 P 004

Serial or Patent No. _____

Filed or Issued _____

For BAG WITH MESH WALL AND HEAT SEAL DIE

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY
STATUS (37 C.F.R. 1.9(f) AND 1.27(b)) - INDEPENDENT INVENTOR

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 C.F.R. 1.9(c) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled BAG WITH MESH WALL AND HEAT SEAL DIE***** described in

- (x) the specification filed herewith
() application Serial No. _____, Filed _____
() Patent No. _____, Issued _____

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 C.F.R. 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 C.F.R. 1.9(d) or a non-profit organization under 37 C.F.R. 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- (x) no such person, concern, or organization
() persons, concerns or organizations listed below*

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 C.F.R. 1.27)

FULL NAME _____
ADDRESS _____

() INDIVIDUAL () SMALL BUSINESS CONCERN () NONPROFIT ORGANIZATION

FULL NAME _____
ADDRESS _____

() INDIVIDUAL () SMALL BUSINESS CONCERN () NONPROFIT ORGANIZATION

FULL NAME _____
ADDRESS _____

() INDIVIDUAL () SMALL BUSINESS CONCERN () NONPROFIT ORGANIZATION

I acknowledge the duty to file in, this application or patent, notification

of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37 C.F.R. 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, and patent issuing thereof, or any patent to which this verified statement is directed.

Michael J. Recchia, Jr.

NAME OF INVENTOR

NAME OF INVENTOR

NAME OF INVENTOR

Michael J. Recchia, Jr.
Signature of Inventor

Signature of Inventor

Signature of Inventor

11-7-00
Date

Date

Date

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